Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium of	or rate level produced by rate revision
effective 04-01-2012	•

- -	(1)	(2) Annual Premium Volumo (Illinois) *	(3) Percent Change (+or.) **
1.	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Passenger		
	Commercial		
2	Automobile Physical Damag		
_	Private Passenger		•
	Commercial		
3.	Liability Other Than Auto	\$492,730	-2.0
4.	Burglary and Theft	102,100	2.0
5.	Glass		
6.	Fidelity		
7.	Surety	•	
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	***************************************	
14.	Crop Hail		
15.	Other		
	Life of Insurance		
•	Does filing only apply to certa Classes? If so,	in territory (territories) or	certain
	specify: NO	· · · · · · · · · · · · · · · · · · ·	
	Brief description of filing. (If find the Organization, specify organization): Annual Written Premium information from the Adjusted to reflect all prior raise.	ISO, Inc. Loss Cost Revision	ivisory n with Company LCM and ELR changes.
	**Change in Company's prem	•	from application of new

Amerisure Insurance Company

Name of Company
Karin Tremain-Senior Analyst & Compliance Consultant Official - Title

rates.

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium	or rate level prod	luced by rate revision
effective 04-01-2012	•	

-	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
	Commercial		
2	Automobile Physical Damag		
	Private Passenger		•
	Commercial		
3.	Liability Other Than Auto	\$1,164,533	-1.7%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		. <u></u>
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Life of Insurance		
•	Does filing only apply to certa Classes? If so, specify: NO	ain territory (territories) or	certain
	Brief description of filing. (If f	filing follows rates of an a	dvisory
	Organization, specify	illing tollows rates of arr a	u visoi y
	organization):	ISO, Inc. Loss Cost Revision	on with Company LCM and ELR changes
	,		
	Annual Written Premium information from	company Page 14.	
	*Adjusted to reflect all prior ra **Change in Company's pren rates.	ate changes. nium level which will resu	It from application of new

Amerisure Mutual Insurance Company

Name of Company
Karin Tremain-Senior Analyst & Compliance Consultant
Official — Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level	produced by rate revision effective	6-1-12
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
	4,308,099	-3.7%
 Liability Other Than Auto Burglary and Theft 		<u> </u>
E Class		
6 Eidelik.		
7 Suroty		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine 12. Homeowners		
12 Commoraid Multi Daril		
15. Other Line of Insurance		
Does filing only apply to certain territory (terr	itories) or certain classes? If so, specify	: <u>No</u>
Brief description of filing. (If filing follows rate Adopting ISO's GL-2011-BGL1 loss costs fili	es of an advisory organization, specify on ng	
*Adjusted to reflect all prior rate changes. **Change in Company's premium level which	n will result from application of new rates	S.
	Bitumino	us Casualty Corporation
		Name of Company
	Dan Trattor Direc	ctor - Rate Development & Filings
	Dan Hotter, Direc	Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate I	evel produced by rate revision effective	6-1-12
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent Change (+ or -)**
Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	480,574	-3.7%
Burglary and Theft		-0.170
5. Glass		
6. Fidelity		
7. Surety		
Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain territory	(territories) or certain classes? If so, specif	ý: <u>No</u>
Brief description of filing. (If filing follows Adopting ISO's GL-2011-BGL1 loss cos	rates of an advisory organization, specify ts filing	organization):
*Adjusted to reflect all prior rate change: **Change in Company's premium level v	which will result from application of new rate	e and Marine Insurance Company
		Name of Company
	Dan Trotter, Dire	ector - Rate Development & Filings Official - Title
		Onicial – Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or	r rate level produced by rate revision
effective 01/13/2011	

-	. (1)	(2) Annual Premium	(3) Percent
4	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
2	Commercial		
2	Automobile Physical Damag		•
	Private Passenger Commercial		
3.		\$92,964	+12.9%
	Liability Other Than Auto	\$92,904	+12.9%
4. 5.	Burglary and Theft Glass		
5. 6.			
0. 7.	Fidelity		
7. 8.	Surety Reiler and Machinery		
o. 9.	Boiler and Machinery Fire	**************************************	
э. 10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Life of Insurance		<u> </u>
•			
	Does filing only apply to certain	in territory (territories) or	certain
	Classes? If so,		
	specify: No		
	Brief description of filing. (If fi	ling follows rates of an a	dvisory
	Organization, specify	Filing positional poting pla	on for our Louisian Desfersional
	organization):		n for our Lawyers Professional
	Liability program. Revisions include prior claim/litigation modifiers.	e base rate and tirm size, ged	graphic location, prior acts and
		to changes	
	*Adjusted to reflect all prior ra **Change in Company's prem		t from application of new
	rates.		
			nsurance Company
			me of Company
		Sandra C. Nelson	
		C	Official – Title

Change in Company's premium or rate level produced by rate Revision effective <u>5-15-2012</u>

	(1) Coverage	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent Change (+ or -)**
	Coverage	volume (minois)	Change (1 or 7
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
2	Commercial	6220 882	+3.9%
3.	Liability Other Than Auto	\$220,882	T3.976
4.	Burglary and Theft		
5.	Glass		
6. 7.	Fidelity		
7. 8.	Surety Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	filing only apply to certain territory (to	·	so, specify:
Brief	description of filing. (If filing follows	rates of an advisory Organization	on, specify organization):
We	are revising the Renewal Premium I	Discount for our Fire/EMS Pro	gram.
	djusted to reflect all prior rate changes		of novy mates
** (hange in Company's premium level wl	nen win result from application	of new rates.
			ern Insurance Company
		Name	of Company
		Lisa S	umners Gist
		Offi	cial - Title

Section 754 EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or ra	te level produced by rate revision
effective 05/01/2012	

(1)	(2)	(3)
· ,	Annual Premium	Percent
Coverage	Volume (Illinois) *	_ Change (+or-) **
Automobile Liability Private		
Passenger		
Commercial		
Automobile Physical Damag		
Private Passenger		•
Commercial		
Liability Other Than Auto	5,407,298.20	-8.0%
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire		
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril	,	
Crop Hail		
Other		
Life of Insurance		
Dan film and and the same	in Annaisan (Annaisanian) an	
Does filing only apply to certa	iin territory (territories) oi	rcenain
Classes? If so, specify: N/A		
specify: N/A		
Print description of filing (If f	iling follows rates of an a	advicon/
Brief description of filing. (If f Organization, specify	illing follows rates of all a	au visor y
organization):	Filing revised rates for	r the Debt Protection Program
organization).	T Hirly Tevised Tates for	Tano Dober Totocatori Togram
*Adjusted to reflect all prior ra		ill fanns manlination of sour
**Change in Company's prem	nium ievei wnich will resu	at from application of new
rates.	CUMIS Insurance	Society Inc
	· · · · · · · · · · · · · · · · · · ·	ime of Company
	INa	IIIIC UI CUIIIUdiiV

Name of Company
Kim E. Erfurth, Consultant, Ethics and Compliance
Official — Title

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3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14.

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

| (1) | (2)
Annual Premium | (3)
Percent |
|----------------------------------------------------------|---------------------------------------|------------------|
| Coverage | Volume (Illinois) * | Change (+or-) ** |
| Automobile Liability Private | | |
| Passenger | | |
| Commercial | | |
| Automobile Physical Damag | | |
| Private Passenger | | |
| Commercial | · · · · · · · · · · · · · · · · · · · | |
| Liability Other Than Auto | 79,883 (Monoline) | +6.5% |
| Burglary and Theft | | |
| Glass | | |
| Fidelity | | |
| Surety | | |
| Boiler and Machinery | | |
| Fire | | |
| Extended Coverage | | |
| Inland Marine | | |
| Homeowners | | |
| Commercial Multi-Peril | | |
| Crop Hail | | |
| Other | | |
| Life of Insurance | | |
| Does filing only apply to certa Classes? If so, specify: | in territory (territories) o | r certain |

*Adjusted to reflect all prior rate changes.

Organization, specify

organization):

Frankenmuth Mutual Insurance Company

Name of Company

Annie Kribs - Product Analyst

ISO Circular LI-GL-2011-175/179

^{**}Change in Company's premium level which will result from application of new rates.

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective July 1, 2012

| | (1) | (2) | (3)
Percent |
|------|----------------------------|-----------------------------------|-------------------|
| | Coverage | Annual Premium Volume (Illinois)* | Change (+ or -)** |
| 1. | Automobile Liability | | |
| | Private Passenger | | |
| | Commercial | | |
| 2. | Automobile Physical Damage | | |
| | Private Passenger | | |
| | Commercial | | |
| 3. | Liability Other Than Auto | \$3,022,379 | 6.6% |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | 1919 |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| l 4. | Crop Hail | | |
| l 5. | Other | | |
| | Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopt GL-2010-BGL1, GL-2010-IALL1, ML-2010-RLA1, GL-2010-OCT10, GL-2010-OELP1, with modifications.

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

| Grinnell Mutual Reinsurance Company |
|-------------------------------------|
| Name of Company |
| Kimberley A. Ward, FCAS, MAAA |
| Actuary |
| Official - Title |

| | Change in Company's premiun | n or rate level produced by | rate revision effective | 6/1/2012 |
|----------------------|--------------------------------------------------------------------------|-----------------------------|----------------------------------|---------------------|
| | | | | |
| | | (2) | (3) | |
| | | Annual Premium | Percent | |
| | | Volume (Illinois) | Change (+ or -) | |
| 1. | Automobile Liability | | | |
| | Private Passenger | | | |
| | Commercial | | | |
| 2. | Automobile Physical Damage Private Passenger Commercial | | | |
| 3. | Liability Other Than Auto | 65,209 | -2% | |
| 4. | Burglary and Theft | 03,203 | -2 /0 | |
| т .
5. | Glass | | | |
| 6. | Fidelity | | | |
| 7. | Surety | | ····· | |
| 8. | Boiler and Machinery | | | |
| 9. | Fire | | | |
| 10. | Extended Coverage | | | |
| 11. | Inland Marine | | | |
| 12. | Homeowners | | | , |
| 13. | Commercial Multi-Peril | | | |
| 14. | Crop Hail | | | |
| 15. | Other | | | |
| | Line of Insurance | | | |
| | | | | |
| * D- | as Eliza anti-anni-ta anti-atamita | | lacence? If an amonifu | |
| | es filing only apply to certain territonises/Operations (Subline Code 33 | | | 226) |
| Prei | nises/Operations (Subline Code 33 | 94) and Products/Complete | ed Operations (Subline Code | 330) |
| | | | | |
| | | | | |
| Brie | f description of filing. (If filing follow | vs rates of an advisory org | ganization, specify organization | on): |
| | rance Services Office | | | |
| Gen | eral Liability Advisory Prospective | Loss Cost - Filing Design | ation Number GL-2011-BGL1 | |
| | | | | |
| | | | | |
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| | | | | |
| | | | | |
| | | | | |
| | | | Llowford Application | I Indomnity Company |
| | | | Hartford Accident and | Company |
| | | | Name of | Оотрану |
| | | | | |
| | | | Aaron Mills, AVP | |
| | | | Official | - Title |

| | Change in Company's premium | n or rate level produced by | y rate revision effective | 6/1/2012 |
|-------|--------------------------------------------------------------------------|---------------------------------------|---------------------------------|-------------------|
| | | | | |
| | | (2) | (3) | |
| | | (2)
Annual Premium | Percent | |
| | | Volume (Illinois) | Change (+ or -) | |
| 1. | Automobile Liability | voidino (minolo) | - Chango (* Cr.) | |
| | Private Passenger | | | |
| | Commercial | | | |
| 2. | Automobile Physical Damage | · · · · · · · · · · · · · · · · · · · | - | |
| | Private Passenger | | | |
| | Commercial | | | |
| 3. | Liability Other Than Auto | 1,000,857 | -2% | |
| 4. | Burglary and Theft | | | |
| 5. | Glass | | | |
| 6. | Fidelity | | | |
| 7. | Surety | | | |
| 8. | Boiler and Machinery | | | |
| 9. | Fire | | | |
| 10. | Extended Coverage | | | |
| 11. | Inland Marine | | | |
| 12. | Homeowners | | | |
| 13. | Commercial Multi-Peril | | | |
| 14. | Crop Hail | | | |
| 15. | Other | | | |
| | Line of Insurance | | | |
| | | | | |
| * 🗅 - | an filing and combon to make a | | January If an annaite | |
| | es filing only apply to certain territonises/Operations (Subline Code 33 | | | lo 336) |
| riei | mses/Operations (Subine Code 33 | 94) and Products/Complet | ed Operations (Subline Cod | le 330) |
| | | | | |
| | | | | |
| Brie | f description of filing. (If filing follow | vs rates of an advisory ord | nanization specify organization | tion): |
| | rance Services Office | vo rates or air davisory org | gamzadon, opocny organiza | |
| | eral Liability Advisory Prospective | Loss Cost - Filing Design | ation Number GL-2011-BGI | _1 |
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| | | | | |
| | | | | |
| | | | Hartford Casualty | Insurance Company |
| | | | | f Company |
| | | | | |
| | | | | |
| | | | Aaron Mills, AVP | |
| | | | Offici | al - Title |

| | Change in Company's premiun | n or rate level produced by | rate revision effective | 6/1/2012 |
|----------|---------------------------------------------------------------------|------------------------------|-----------------------------------|---------------|
| | | | | |
| | | (2) | (3) | |
| | | Annual Premium | Percent | |
| | | Volume (Illinois) | Change (+ or -) | |
| 1. | Automobile Liability | | | |
| | Private Passenger | | | |
| | Commercial | | | |
| 2. | Automobile Physical Damage
Private Passenger
Commercial | | | |
| 3. | | E 229 709 | -2% | |
| | Liability Other Than Auto | 5,238,798 | -276 | |
| 4.
5. | Burglary and Theft
Glass | | - | |
| 5.
6. | Fidelity | | | |
| 7. | Surety | | | |
| 8. | Boiler and Machinery | | | |
| 9. | Fire | | | |
| 10. | Extended Coverage | | | |
| 11. | Inland Marine | | | |
| 12. | Homeowners | | | |
| 13. | Commercial Multi-Peril | | | |
| 14. | Crop Hail | | | |
| 15. | Other | - | | |
| | Line of Insurance | | | |
| | | | | |
| | es filing only apply to certain territo | | | |
| Prer | nises/Operations (Subline Code 33 | 34) and Products/Complet | ed Operations (Subline Code | 336) |
| | | | | |
| | | | | |
| Deia | description of filing (If filing follow | un ratas of an advisant are | controtion specify organization | m). |
| | f description of filing. (If filing follov
rance Services Office | ws rates or air advisory org | gariization, specify organization |)iij. |
| | eral Liability Advisory Prospective | Loss Cost - Filing Design | ation Number GL-2011-BGL1 | |
| <u> </u> | Clar Elability / taviocity i Toopcotive | 2000 Cook Timing Doolgin | | |
| | | | | |
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| | | | | |
| | e e | = , | Hartford Fire Insi | rance Company |
| | | | Name of | Company |
| | | | | • |
| | | | | |
| | | | Aaron Mills, AVP | |
| | | | Official | - Title |

| | Change in Company's premiun | n or rate level produced by | y rate revision effective | 6/1/2012 |
|------|--------------------------------------------|---------------------------------------|----------------------------------|---------------------|
| | | | | |
| | | (2) | (3) | |
| | | Annual Premium | Percent | |
| | | Volume (Illinois) | Change (+ or -) | |
| 1. | Automobile Liability | | | |
| | Private Passenger | | | |
| | Commercial | | | |
| 2. | Automobile Physical Damage | | | |
| | Private Passenger | | | |
| | Commercial | | | |
| 3. | Liability Other Than Auto | 61,318 | -2% | |
| 4. | Burglary and Theft | | | |
| 5. | Glass | | | |
| 6. | Fidelity | | | |
| 7. | Surety | | | |
| 8. | Boiler and Machinery | | | |
| 9. | Fire | | | |
| 10. | Extended Coverage | | | |
| 11. | Inland Marine | | | |
| 12. | Homeowners | | | |
| 13. | Commercial Multi-Peril | | | |
| 14. | Crop Hail | | | |
| 15. | Other | | | |
| | Line of Insurance | | | |
| | | | | |
| * Do | es filing only apply to certain territo | ory (territories) or certain o | classes? If so, specify: | |
| | mises/Operations (Subline Code 33 | | | 336) |
| | | · · · · · · · · · · · · · · · · · · · | | , |
| | | | | |
| | | | | |
| | f description of filing. (If filing follow | ws rates of an advisory org | ganization, specify organization | on): |
| | rance Services Office | | | |
| Gen | eral Liability Advisory Prospective | Loss Cost - Filing Design | ation Number GL-2011-BGL | |
| | | | | |
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| | | | | |
| | * | | 11.752 | |
| | | | Hartford Insurance | Company of Illinois |
| | | | Name of | Company |
| | | | | |
| | | | Agron Mills AVD | |
| | | | Aaron Mills, AVP Officia | _ Title |
| | | | Onicia | - IIU C |

| | Change in Company's premiun | n or rate level produced by | rate revision effective | 6/1/2012 |
|------|--------------------------------------------|--------------------------------|--------------------------------|-------------------------------|
| | | | | |
| | | (2) | (3) | |
| | | Annual Premium | Percent | |
| | | Volume (Illinois) | | |
| 1. | Automobile Liability | <u></u> | | |
| | Private Passenger | | | |
| | Commercial | | | |
| 2. | Automobile Physical Damage | | | |
| | Private Passenger | | | |
| | Commercial | | | |
| 3. | Liability Other Than Auto | 281,542 | -2% | |
| 4. | Burglary and Theft | | | |
| 5. | Glass | | | |
| 6. | Fidelity | | - | |
| 7. | Surety | | | |
| 8. | Boiler and Machinery | | | |
| 9. | Fire | | | |
| 10. | Extended Coverage | | | |
| 11. | Inland Marine | | | |
| 12. | Homeowners | | | |
| 13. | Commercial Multi-Peril | | | |
| 14. | Crop Hail | | | |
| 15. | Other | | | |
| | Line of Insurance | | | |
| | | | | |
| * Do | es filing only apply to certain territo | ory (territories) or certain c | lasses? If so, specify: | |
| | mises/Operations (Subline Code 33 | | | e 336) |
| | | | | |
| | | | | |
| | | | | |
| | f description of filing. (If filing follow | ws rates of an advisory org | ganization, specify organizati | on): |
| | rance Services Office | | | |
| Gen | eral Liability Advisory Prospective | Loss Cost - Filing Design | ation Number GL-2011-BGL | <u>1</u> |
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| | | | Handfand Incomence C | |
| | - | - | naruoro insurance Ci | ompany of the Midwest Company |
| | | | ivaine of | Сопрапу |
| | | | | |
| | | | Aaron Mills, AVP | |
| | | | | al - Title |
| | | | Official | |

| | Change in Company's premiun | n or rate level produced by | rate revision effective | 6/1/2012 |
|------------|---------------------------------------------|---------------------------------------|----------------------------------|-------------------|
| | | | | |
| | | (2) | (3) | |
| | | Annual Premium | Percent | |
| | | Volume (Illinois) | Change (+ or -) | |
| 1. | Automobile Liability | | | |
| | Private Passenger | | | |
| | Commercial | | | |
| 2. | Automobile Physical Damage | | | |
| | Private Passenger | | | |
| | Commercial | | | |
| 3. | Liability Other Than Auto | 1,390,042 | -2% | |
| 4. | Burglary and Theft | | | |
| 5. | Glass | | | |
| 6. | Fidelity | | | |
| 7. | Surety | | | |
| 8. | Boiler and Machinery | | | |
| 9. | Fire | | | |
| 10. | Extended Coverage | | | |
| 11. | Inland Marine | | | |
| 12. | Homeowners Commercial Multi-Peril | | | |
| 13. | | | | |
| 14.
15. | Crop Hail
Other | · · · · · · · · · · · · · · · · · · · | | |
| 13. | Line of Insurance | | | |
| | Elife of Histianice | | | |
| | | | | |
| * Do | oes filing only apply to certain territo | ory (territories) or certain c | lasses? If so, specify: | |
| Prei | mises/Operations (Subline Code 33 | 34) and Products/Complete | ed Operations (Subline Code | 336) |
| | | | | |
| | | | | |
| | | | | |
| | of description of filing. (If filing follow | ws rates of an advisory org | ganization, specify organization | on): |
| | rance Services Office | | | |
| Gen | neral Liability Advisory Prospective | Loss Cost - Filing Designa | ation Number GL-2011-BGL1 | |
| | | | | |
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| | | | | |
| | | | | |
| | | | | |
| | - | = . | Hartford Underwriters | Incurance Company |
| | | | | Company |
| | | | i tairie oi | Company |
| | | | | |
| | | | Aaron Mills, AVP | |
| | | | Official | - Title |

Change in Company's premium or rate level produced by rate revision effective 6/1/2012

| | (1) | (2)
Annual Premium | (3)
Percent |
|-------------------|---------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-------------------|
| | Coverage | Volume (Illinois)* | Change (+ or -)** |
| 1. | Automobile Liability | | |
| | Private Passenger | 100.00 | |
| | Commercial | | |
| 2. | Automobile Physical Damage | | |
| | Private Passenger | | |
| | Commercial | | 4.40/ |
| 3. | Liability Other Than Auto | \$ 41,100 | 4.1% |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other | | |
| | Line of Insurance | | |
| Does
No | filing only apply to certain territory (territorie | es) or certain classes? If so, specify: | · |
| | description of filing. (If filing follows rates of sting ISO loss costs found in reference fi | f an advisory organization, specify organizati | on): |
| ** | Adjusted to reflect all prior rate changes. Change in Company's premium level which result from application of new rates. | n will | |

Pioneer Specialty Insurance Company

Name of Company

Sara Stark, Sr. Actuarial Analyst

| | Change in Company's premiun | n or rate level produced by | rate revision effective | 6/1/2012 |
|-------|-------------------------------------------------|-----------------------------------------------|--------------------------------|-------------------------|
| | | | | |
| | | (2) | (3) | |
| | | Annual Premium | Percent | |
| | | Volume (Illinois) | Change (+ or -) | |
| 1. | Automobile Liability | | | |
| | Private Passenger | | | |
| | Commercial | | | |
| 2. | Automobile Physical Damage
Private Passenger | | | |
| | Commercial | | | |
| 3. | Liability Other Than Auto | 2,462 | -2% | |
| 4. | Burglary and Theft | <u> </u> | | |
| 5. | Glass | | | |
| 6. | Fidelity | | | |
| 7. | Surety | | | |
| 8. | Boiler and Machinery | | | |
| 9. | Fire | | | |
| 10. | Extended Coverage | | | |
| 11. | Inland Marine | | | |
| 12. | Homeowners | | | |
| 13. | Commercial Multi-Peril | | | |
| 14. | Crop Hail | | | |
| 15. | Other | | | |
| | Line of Insurance | | | |
| | | | | |
| * Dc | es filing only apply to certain territo | ory (territories) or certain d | lasses? If so specify | |
| | mises/Operations (Subline Code 33 | | | 336) |
| 1 10. | THOOGRAPHICATION (COOMING COOKS OF | , , <u>, , , , , , , , , , , , , , , , , </u> | or operations (outside the | |
| | | 84444 | | |
| | | | | |
| Brie | f description of filing. (If filing follow | vs rates of an advisory org | janization, specify organizati | on): |
| | rance Services Office | · | | |
| Gen | eral Liability Advisory Prospective | Loss Cost - Filing Designa | ation Number GL-2011-BGL | 1 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | Duaments and Control | dielna Ca allantani |
| | | | Property and Casual | ty Ins. Co. of Hartford |
| | | | ivaine of | Company |
| | | | | |
| | | | Aaron Mills, AVP | |
| | | | | al - Title |

Affairs

| | (1) | (2) | (3) |
|------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|-------------------|
| | (1) | (2)
Annual Premium | (3)
Percent |
| | Coverage | Volume (Illinois)* | Change (+ or -)** |
| | Automobile Liability | | |
| | Private Passenger | | |
| | Commercial | | |
| | Automobile Physical Damage | | |
| | Private Passenger | | |
| | Commercial | | |
| | Liability Other Than Auto | \$280,166 | 1.3% |
| | Burglary and Theft | | |
| | Glass | | |
| | Fidelity | | |
| | Surety | | |
| | Boiler and Machinery | | |
| | Fire | | |
| | Extended Coverage | | |
| | Inland Marine | | |
| | Homeowners | | |
| | Commercial Multi-Peril | | |
| | Crop Hail | | |
| | r | | |
| | Other | | |
| | Other Line of Insurance | territories) or certain classes? If so specify | |
| f (| Line of Insurance iling only apply to certain territory (| territories) or certain classes? If so, specify: vs rates of an advisory organization, specify gnation # GL-2011-BGL1. | |
| f ol | Line of Insurance iling only apply to certain territory (| vs rates of an advisory organization, specify gnation # GL-2011-BGL1. | organization): |
| f el | Line of Insurance iling only apply to certain territory (description of filing. (If filing followementing ISO loss cost revision desi djusted to reflect all prior rate change ange in Company's premium level of | vs rates of an advisory organization, specify gnation # GL-2011-BGL1. es. which will | organization): |
| f pl | Line of Insurance iling only apply to certain territory (description of filing. (If filing followementing ISO loss cost revision desi djusted to reflect all prior rate change ange in Company's premium level of | vs rates of an advisory organization, specify gnation # GL-2011-BGL1. es. which will Shelte | organization): |

| | Change in Company's premium | or rate level produced by | rate revision effective | 6/1/2012 |
|-------------|--------------------------------------------|-------------------------------|--------------------------------|----------------|
| | | | | |
| | | (2) | (3) | |
| | | Annual Premium | Percent | |
| | | Volume (Illinois) | Change (+ or -) | |
| 1. | Automobile Liability | | | |
| | Private Passenger | | | |
| | Commercial | | | |
| 2. | Automobile Physical Damage | | | |
| | Private Passenger | | | |
| | Commercial | | | |
| 3. | Liability Other Than Auto | 372,804 | -2% | |
| 4. | Burglary and Theft | | | |
| 5. | Glass | | | |
| 6. | Fidelity | | | |
| 7. | Surety | | | |
| 8. | Boiler and Machinery | | | |
| 9. | Fire | | | |
| 10. | Extended Coverage | | | |
| 11. | Inland Marine | | | |
| 12. | Homeowners | | | |
| 13. | Commercial Multi-Peril | | | |
| 14. | Crop Hail | | <u></u> | |
| 15. | Other | | | |
| | Line of Insurance | | | |
| | | | | |
| * Do | es filing only apply to certain territo | ny (territories) or certain c | laceae? If co enacify: | |
| | nises/Operations (Subline Code 33 | | | 336) |
| 1 101 | nises/Operations (Subime Code 30 | - and i roducts/complete | ed Operations (Subilité Code | 330) |
| | | | | |
| | | | | • |
| Brie | f description of filing. (If filing follow | vs rates of an advisory ord | anization specify organization | uu). |
| | rance Services Office | to rates or air advisory org | jamzanom, opeony organizano | |
| | eral Liability Advisory Prospective | oss Cost - Filing Design | ation Number GL-2011-BGL1 | <u> </u> |
| | Crai Liability / laticolly : respective : | zooo ooot 1 ming oodigin | | |
| | | | | |
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| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | Twin City-Fire Ins | urance Company |
| | | | | Company |
| | | | | ipuity |
| | | | | |
| | | | Aaron Mills, AVP | |
| | | | Official | - Title |

Change in Company's premium or rate level produced by rate revision effective 6/1/2012

| | (1) | (2)
Annual Premium | (3)
Percent |
|------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|-------------------|
| | Coverage | Volume (Illinois)* | Change (+ or -)** |
| 1. | Automobile Liability | | |
| | Private Passenger | | |
| | Commercial | | |
| 2. | Automobile Physical Damage | | |
| | Private Passenger | | |
| | Commercial | | |
| 3. | Liability Other Than Auto | \$ 586,250 | -2.1% |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other | | |
| | Line of Insurance | | |
| | filing only apply to certain territory (territor | ies) or certain classes? If so, specify: | |
| No | | | |
| | lescription of filing. (If filing follows rates of the control of | of an advisory organization, specify organization | tion): |
| Adop | ung 130 loss costs lound in reference | inny GL-2011-BGL1. | |
| | | | |
| | - | | |
| | | | |

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Western National Mutual Insurance Company

Name of Company

Sara Stark, Sr. Actuarial Analyst